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Arts as a Means for Civic Engagement: A Tool for Social Workers

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Arts as a Means for Civic Engagement: A Tool for Social Workers

by

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MSW Clinical Research Paper

Presented to the Faculty of the
School of Social Work
St. Catherine University and the University of St. Thomas
St. Paul, Minnesota
In Partial fulfillment of the Requirements for the Degree of
Master of Social Work

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The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University/University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present the findings of the study. This project is neither a Master's thesis nor a dissertation.

Abstract

The purpose of this study was to explore the impact art could play on engaging society in a public health matter. Qualitative interviews were conducted with mental health professionals who provide clinical services to individuals experiencing serious mental illness. These audio-recorded interviews were conducted within a period of two weeks and were analyzed using grounded theory methodology. The most common themes that emerged were social inclusion, creating dialogue and deterring mental health stigma. Implications from this study included a need for more case studies in the U.S. regarding civic engagement efforts and an increased use of art, and collaboration with artists, to engage the community in civic matters.

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Art as a Means for Civic Engagement: A Tool for Social Workers

One in twenty-five U.S. adults experiences a serious mental illness (SMI) that substantially interferes with or limits one or more major life activities in a given year. Among those adults suffering from SMI only 62.9% received mental health services in the last year (Center for Behavioral Health Statistics and Quality [CBHSQ], 2015). When looking at the youth population in the U.S. SMI cannot be considered due to age, but is analogous with severe mental disorders (SMD), which includes mood, behavior and anxiety disorders that are marked by extreme impairment in daily life or severe distress. One in five youth, 21.4%, aged 13-18 and 13% of youth aged 8-15 experience a SMD at some point (Merikangas et al., 2010). Due to the complexity of measuring treatment among SMD, statistics regarding prevalence of treatment occurring were not available. However, when looking at treatment for any mental health needs only 50.6% of children with a mental health disorder aged 8-15 received mental health services in the last year (Center for Disease Control and Prevention [CDCP], 2013).

Due to the severe damaging effects of mental illness it is worrisome to see that only half of U.S. children and just more than a third of U.S. adults receive treatment for such services. Those suffering from SMI or SMD and not receiving any professional support are likely to struggle to manage their symptoms. Suicide is the 10th leading cause of death in the U.S. overall and is the 2nd leading cause of death for individuals ages 10-34 (CDCP, 2015). These statistics do not cover the vast array of issues that can stem from untreated mental illness; they do however highlight a significant need to understand why people in the U.S. are not receiving treatment for mental illness.

One of the barriers that most significantly impacts clients receiving mental health treatment is the negative stigma that is attached to it. Stigma surrounding mental illness is a

major contributing factor to a lack of treatment or too little treatment (Shim & Rust, 2013). With serious mental illness causing significant impairment in an individual's life this stigma only adds to the difficulties of the individual. Stigma also creates difficulties for caregivers to provide for individuals suffering from SMI. If a caregiver believes stigma regarding SMI then they are likely to respond to the person they are caring for differently, which impacts treatment (Bulanda, Bruhn, Byro-Johnson and Zentmyer, 2014). This evidence shows that there is a mental health crisis in the U.S. and that stigma related to mental health has a negative effect on treatment. In order to make progress forward on the treatment of SMD and SMI the stigma that is attached to it must be addressed through a process of social change.

The Social Work Code of Ethics states the need for social workers to involve the community in the social change process. Code 6.02 states: "Social workers should facilitate informed participation by the public in shaping social policies and institutions" (National Association of Social Workers [NASW], 1999). This sentiment is echoed again in the education system as The Council on Social Work Education (CSWE) accreditation standards mentions justice initiatives multiple times. Educational policy 2.1.5 states that:

Social workers recognize global interconnections of oppression and are knowledgeable about theories of justice and strategies to promote human and civil rights. Social work incorporates social justice practices in organizational institutions and society to ensure that these basic human rights are distributed equitably and without prejudice (2.15).

This standard calls on social workers to be agents of social change and to find ways to include greater society in the process. Incorporating such change invokes the principle of client empowerment. Empowerment is "the processes through which people who lack power become more powerful, not in the sense of having power over others but in working towards or achieving their aims" (Harris & White, empowerment definition). Empowerment is considered a main tenet

of social work and is important to incorporate in all levels of the field including micro, mezzo and macro practice (Hoefler, 2012; Kirst-Ashman, 2011). The importance of client change on multiple levels is imperative in order for empowerment to truly occur. Having immediate needs met on a micro level without adequate attention to social structures and barriers that caused it can prevent the experience of empowerment (Jonsson, 2010; Wendt & Seymour, 2010). Social workers are often working with clients in settings where there are rules, regulations and structures put in place to create order and procedure, but often conflict with the basic idea of empowerment itself (Wendt & Seymour, 2010). It is for this reason that social workers need to address; “social structures, barriers and power relations” which are responsible for creating inequalities and injustices in order to improve individual conditions and increase access to “power and influence in society” (Jonsson, 2010, p. 404). It is social workers that are then called upon to assist society in creating spaces that engage the public in participation on civic matters.

When looking for ways social workers can assist in engaging the public in civic matters it is important to create opportunities that can be participatory for people of diverse backgrounds and levels of ability. One tool that can be supportive in accomplishing this is the community-based arts. The first step to involving clients in the change process is engaging them. Art draws responses out of people, therefore making engagement a natural occurrence with no need for prompting (Romney, 2010). When working in a community it is likely that there will be multiple viewpoints when it comes to social issues. Arts can give further insight to a social issue by using innovative means to show multiple points of view (Moxley, Feen-Calligan & Washington, 2012; Romney, 2010). Political and structural change often involves bureaucracy and rigid guidelines, which can create feelings of powerlessness among individuals fighting for social change. Art, however, can offer new ways of thinking, structuring and improving current structural processes

(Catherwood-Ginn & Leonard, 2012). It is for these reasons that art can be seen as a potentially useful tool for social workers looking to improve civic engagement in their communities.

To receive an understanding of how arts can be used as a medium for civic engagement it is necessary to consider the literature. The history of community engagement in the arts has changed over time to include a wider variety of arts as well as a broader set of benefits to be expected (Burnham, 2010; Cleveland, 2010; Stankiewicz, 2009). Benefits of the arts have been studied for some time and show positive correlations to more personal benefits such as mental health and physical wellbeing (Jermyn, 2001; McCarthy & Ondaatje, 2004). Studies regarding the benefits of the arts and social inclusion and empowerment have been found to have positive results as well with research showing that communities were able to form a stronger sense of identity through public art, which allowed individuals to better understand their role in the community (Kirt-Ashman, 2011; McCarthy et al., 2004). It is after this understanding that we look at the studies done where community based civic engagement is already occurring and see what has and has not already been examined (Burnham, 2010; Cleveland, 2010; Franco, 2006; Stewart, 2011; Thompson, 2010).

Social workers are positioned to make an impact regarding civic participation in social matters, and are called upon to do so by the Code of Ethics. Social workers also often work in settings that have structures and policies that create a culture of powerlessness for clients. Yet it is a main goal of social workers to empower clients to problem solve issues and become involved in the process of making change. The arts community has been found to be engaging and empowering on individual and community levels. It is for this reason that this researcher looks to explore ways community organizers, social workers, mental health practitioners, and agencies are currently involving their communities in civic engagement through the arts to combat mental

health stigmas. This research will look at the types of arts used, how and where they were displayed, and any measured impacts the artwork had on the community. From the information gathered it could be determined whether or not this is a practice that could be formally adopted into the field of social work.

Literature Review

Defining Terms

Many terms will be repeated that need to be defined in order to best explain the point of view of this researcher. One of the main goals of this research is to look at communities. For the purpose of this paper a community is defined as; “social relationships based on commonality, either derived from living in a particular geographical location, such as a defined urban neighbourhood or a village, or sharing a particular interest(s) or goal(s)” (Harris & White, community definition). The majority of this paper references communities based on geographical location. Another term that is referred to often is the arts. For the purpose of this paper the arts includes both audio and visual mediums. Visual arts can include: paintings, murals, sculptures and tapestries. Audio arts can include: music, spoken word and storytelling. Civic engagement is used through the research and “refers to the ways in which citizens participate in the life of a community in order to improve conditions for others or to help shape the community’s future” (Adler & Goggin, 2005, p.239). These definitions will be used throughout the study.

History

Social work began its existence in the United States in the middle and late 1800s. It began in response to a growing population of people living in poverty, many of whom were immigrants. This work quickly branched into multiple fields of work, one of which was

settlement houses (Day & Schiele, 2013). The introduction of settlement houses allowed for another viewpoint regarding individual problems, such as poverty, to arise. The idea that social structures were the cause to many individual problems began and spurred social workers to begin organizing to work towards social reforms (Addams, 1999; Day, et al., 2013).

An example of a settlement house that comes directly from the field of social work is the Hull House in Chicago and the work of Ellen Gates Starr, who worked alongside Jane Adams. Arts and crafts were a large part of Hull House and Starr saw the possibility to use those opportunities to complete social reform (Stankiewicz, 1989). Starr was considered more radical and political than the more well known Adams. Even though Starr was radical for her time, some of the reform she sought through art focused more specifically on individual change, rather than systemic. The first art exhibits that Starr arranged for Hull House were meant to improve the lives of those living in poverty by introducing the examples of beauty and models of good design. It was thought that the value in the artwork would be to provide comfort and inspire the poor (Stankiewicz, 1989). Therefore Starr's method relied on art as a catalyst for independent change, not addressing the systemic needs.

The idea of artists working with communities is not something that is new. Artists have worked with communities for thousands of years; some of the ways in which they are doing this has changed with the times (Burnham, 2010; Cleveland, 2010). Community based art done in the 1970's was often referred to in terms of "beautification, quality of life and community"; while community art work completed in the 2000's and later often is referred to in terms of "Economic development and community revitalization" (Cleveland, 2002, *This Is A New Field*). This change in terms showed a change in people's thought process on how art could be used. It also

showed that art was being seen as a beneficial tool by many that could be used for improvement (Cleveland, 2002).

Personal Benefits

The benefits of art have been studied in relation to a variety of personal benefits. Research has been done looking at the benefits of art and cognitive development, physical and mental health. This research showed that improvements were made in individual's health as a result of involvement with art or an art group (Jermyn, 2001; McCarthy et al, 2004). Other research finds people stating that they feel they have benefited due to gaining more confidence or seeing themselves in a way that they had not before (Stickley, 2010). This type of benefit could allow someone to feel more comfortable seeking out an issue they had not had confidence with before or give insight to a topic they had not previously had. There is space created in an arts community which allows people to tap into innovative and creative ideas (Stephenson, 2005). This could allow for people to think of more solutions and potentially be more open to others ideas for solutions. These personal benefits that one can gain from involvement in arts can have a secondary benefit in how the person addresses and works with issues present on a community level.

Social Inclusion & Empowerment

There have been some research studies done regarding social inclusion in the community. Specifically, looking at engaging with art on a public or community level to allow for creation of community symbols through use of neighborhood murals. This allows the community to create an identity which in turn can increase social inclusion on an individual level (McCarthy et al., 2004). The idea here is that without a community identity, it is difficult to have personal

inclusion in that community. Another viewpoint similar to this discusses empowerment being a part of social inclusion. The idea is that without social empowerment, an individual is unable to achieve individual empowerment. This is because individuals need to be able to make choices regarding policies, voting, and community needs, in order for them to have personal empowerment, which calls for the ability to provide their own input (Kirt-Ashman, 2011). Therefore social empowerment must occur for individuals to become empowered on their own. Stickley (2010) researched people who were in a community based arts program and found multiple benefits, including: people feeling like they had a role, feeling a sense of identity and feeling a sense of purpose. This all came out of spending a set amount of time doing art in a communal setting, without any specific social justice purpose.

Reasons for Including the Arts in Social Change

When looking at evidence for why art can have an impact on social change it can be beneficial to see what is already known about the benefits of art and which benefits can be used on a community level to better understand civic engagement. Art has been regarded by some to be a communicative experience. It allows for a deeper discussion to occur that can include many alternate viewpoints. One of the reasons art can be so beneficial in this regard is because there is enough space allowed to show an issue from all angles (McCarthy et al., 2004). This is why art has been beneficial to the field of history as well, which often has many complex parts that together explain a point in time (Franco, 2006). One reason art can be considered to be so effective is that efficient dialogue involves thinking, feeling, listening and learning, as well as talking (Romney, 2012). Therefore incorporating the arts creates a larger space where those types of interactions can occur for people.

Community issues are usually complex in nature and involve multiple levels of people and groups who are affected. This means that the approach that best fits one individual or group will likely not fit them all. Cleveland (2010) explains the field of “Arts for Change” in his research and suggests that a holistic arts approach be used to best be able to address the needs of all the parties involved in the issue. The holistic system that Cleveland explains includes: education and information, building and improving, inspiring and mobilizing, nurturing and healing. Throughout all of the system arts are integrated on mezzo and macro levels. This could include community groups that meet to create art or have conversations together or it could be a mural in a public area of the city that draws attention to a social need.

It can be questioned whether art alone allows someone the space and time to further process information, without the art even being focused on a particular social change issue. Cleveland (2010) stated that in his study of art programs he found that the most successful programs all had an artistic main purpose and a quality artist involved. This allowed the artist to focus on what they knew best and, “use the art as a vehicle”. This shows that the allowance of a quality space for communal art to occur can alone have an impact. The idea here is to have an artist, whose main goal is art, be the individual who creates the work. The art that is being created should be the main goal, with the message it portrays being secondary. This allows individuals to see what they want in the art and allow for more interpretation (Cleveland, 2010).

Another reason art could be said to make an impact is that both visual and audio content have more of an emotional impact on individuals which allows them to connect more significantly to the material. Research done on visitors of the Minnesota History Center who viewed visuals (theatrical role playing) and audio (story telling) showed that individuals who had an emotional connection to the visit were more likely to “absorb, analyze, and discuss” the

material (Franco, 2006). It is unknown if this impact is due to the type of art content that was experienced; however, it does show that having an emotional response to art can allow for a deeper analysis. This shows that visual and audio content has the capability to impact people on a level that they may not receive from other forms of attempted engagement.

Animating Democracy

Work surrounding art for social change has significantly increased over the years and includes a variety of examples including environmental, community development and business related (Cleveland, 2010). Some of the most impactful studies being done are under the name of Animating Democracy. Animating Democracy is a national organization based in the U.S. that is focused on arts based community development. They are actively looking to promote civic engagement through the arts, research the topic, support ways to make engagement occur and create partnerships (animatingdemocracy.org). They have helped produce a range of literature, which support the benefits of arts based civic engagement.

Brooklyn, New York is home to the Center of Urban Pedagogy. It was created by a group of artists in the late 1990's and started as a space to talk about ideas related to living in the city through a culturally engaged form that fit students' urban living environments. The group uses art as a way to engage its community's youth in meaningful city planning issues (Thompson, 2010). The website for the agency shows examples of students engaging their community in discussing issues, such as who makes decisions regarding the Supplemental Nutrition Assistance Program, also known as SNAP. Students drew diagrams of the SNAP system and thought of alternatives together. They also made a detailed poster showing how the SNAP system worked and what people think about the program (The Urban Center of Pedagogy, 2015). This project

involved youth participation in the civic engagement process and is an example of how visual arts can be used to spread information and awareness, as well as engage members of the community.

Another example of youth (ages 13-25) involvement in civic engagement comes from the United States All-ages Movement Project (AMP). The AMP is a national network of organizations that connect young people through music and art with a focus on personal and community transformation. In 2006 AMP surveyed over 100 organizations and found that in every town they researched there were young people making interesting and creative things happen in their communities (Stewart, 2011). When looking at civic engagement 51 organizations responded, and out of those 51, 38 stated that they had a civic engagement component to their work. Of those who had a civic engagement component 66% stated they had a working relationship with an elected official and 45% hosted election related activities to engage other youth. All of these organizations recognized themselves as being primarily music and art focused (Stewart, 2011). This shows the growth in interest in the United States of people using music and art to engage with their communities, often times towards specific planned change.

Social workers that are working with clients on issues related to social structures need to find ways to include the client in the change process. This can be difficult to do due to the power differentials clients face in agencies and social systems. However, it is necessary in order for the client to gain a sense of empowerment that they take part in the process and are engaged in doing so. Social workers can potentially look to the field of community art for answers on how to engage clients in civic participation. The field of community artwork is not new, but has changed greatly in recent years to allow examples of community members becoming engaged in issues

relevant to their community through various forms of arts. It is this researcher's goal to further understand the forms of arts used, the way they are displayed and their measured impact on the community.

Stigma Case Study

When looking for literature that includes arts based civic engagement regarding mental health stigma it was necessary to look for studies conducted outside of the United States. The lack of U.S. literature could itself show a lack of understanding on the relevance of the topic. However, it was possible to find a study based out of the United Kingdom where research was conducted on 415 attendees of a mental health arts and film festival on stigma and recovery (Quinn, Shulman, Knifton and Byrne, 2011). The study found several significant outcomes about the effects of this type of event on mental health stigma as well as some important implications for practice. The study found that a variety of arts interventions could be used to change mental health stigma by constructing shared meanings and engaging the audience on an emotional level. The study also found that collaborative, community based arts festivals should be involved in a national effort to address stigma and promote wellbeing. This study admits to not being able to decrease negative attitudes regarding mental illness, but that the increase of positive attitudes that occurred in response show the festival was impactful in changing beliefs on stigma (Quinn, et.al, 2011). This study is one example of the type of work that could potentially be done in the U.S. to impact public view on mental health stigma.

Conceptual Framework

The conceptual framework being used for this research is based on conflict theory. Class conflict is the specific theory being used and refers to groups conflicting based on social class

which is decided by wealth, power and family background. This theory also follows the belief that those with a higher social class have more power than those in the lower classes (Kirst-Ashman, 2011). It is for this reason that this researcher assumes the need for support and inclusion of the lower classes, who do not yield the same power as others.

Another theory being used for the conceptual framework of this study is empowerment. The term empowerment “represents the needs and efforts of marginalized groups for a social environment free of inequalities which disfavor them socially, politically and economically” (Jonsson, 2010, p.396). This researcher also takes the viewpoint provided by the NASW Code of Ethics that social workers are responsible in playing a role in helping create these spaces for their communities and clients (NASW, 1999). Further argument for using empowerment theory is supported by the NASW ethical mandate to fight alongside those who are oppressed and marginalized (1999). This can be done by the social worker addressing the issue by finding a solution to the issue effecting their client or client’s community. It can also be done by the social worker helping to engage clients or clients’ communities in the change process (Kirst-Ashman, 2011). While the first option of the social worker solving the issue may address the client’s need at the moment, it does not address ongoing needs of empowerment and inclusion into the social system. Empowerment occurs when a person develops a sense of personal power and the ability to change social institutions (Gutierrez, 1990). When a client is unable to change social institutions that affect them they are unable to gain a sense of empowerment and are not fully included into the social system.

Social workers are trained to work with diverse populations with varying abilities and skill levels (CSWE Policy 2.14). This means social workers constantly need to adapt tools and methods to fit different client needs. The same is true when it comes to topics of social change.

The traditional modes of empowering a client to make social change may include helping them research their representative and write letters or attend a hearing on an important topic. It could even possibly include joining a community organization with a set of policies they want to address with their representatives (Janson, 2011). However, this mode of engagement will not work for everyone so the social worker's role is to then adapt the material to fit the client or community's needs. One way to do this when discussing the topic of social change is to use another medium, such as the arts, to help explain and engage people in the topic.

Methods

Research Design

The purpose of this study was to examine ways in which art is currently being used as a medium for civic engagement in community settings by a variety of community leaders including social workers and non-social workers. This research design is qualitative and exploratory. The purpose of the study was to collect and analyze information regarding forms of art used for civic engagement, the type of displays and impacts seen by community organizers and social workers in the field as it relates to mental health stigma. This researcher conducted in person interviews with practicing community organizers, including those who identify as social workers and human services professionals whose main focus is mental health services. The questions asked were a mix of open ended and closed questions (appendix b). The questions inquired about the types of art used, how they were displayed and whether or not any impacts have been measured.

Sample

The sampling technique used for this research was snowball sampling. To find the sample this researcher obtained contact information for community organization and mental health

leaders in the Minneapolis and St. Paul area from public websites. The websites used included: fairview.org, nami.org, jfcsmpls.org, mentalhealth.mn.edu, peopleincorporated.org and parknicollet.com. This researcher contacted individual leaders from organizations via email to gauge if any of their employees could participate in the study. The email stated the intention of the research and the process in which the researcher would be obtaining information. The email asked potential participants to be involved in an in person or phone interview to collect information regarding community change and art. This researcher sought a sample size of 6-10 participants. Interviews were offered in both in person and over the phone to allow for a higher response rate. Ultimately, a sample of two in person interviews was collected. Consent was obtained before interviews began and was done so via email before the initial meeting.

Protection of Human Subjects

This research proposal was submitted to the Institutional Review Board at the University of St. Thomas for approval. Upon receiving approval this researcher presented and explained the interview process with each interviewee, and obtained consent from him/her before beginning. The consent form (appendix A) noted the purpose of the study and included the researcher plans to protect the individual's confidentiality. Steps this researcher took included assuring confidentiality; including redacting the individual's name and any other identifying information from all notes, transcripts and the final research paper; deleting the audio recording of the interview within a month of the study's conclusion; and keeping interview transcripts and consent forms in a locked filing cabinet until they are destroyed.

Analysis Technique

The technique that was used to analyze the data for this study is grounded theory. Grounded theory is when questions lead to an exploration of the process (Grinnell et al., 2012).

The data from the interviews was transcribed and reviewed using open-code methodology. This researcher read through the data several times and identified words and ideas that were assigned a code. As the codes repeated themselves they began to emerge into themes, which assisted the researcher in determining the most relevant points to include in the results. Themes were the primary focus of the results of this study.

Results

Sample Demographics

Two semi-structured interviews were conducted in March of 2016. Both respondents were female. One of the respondents was a Licensed Marriage and Family Therapist and the other was a Licensed Independent Clinical Social Worker. One of the clinicians worked in a day treatment mental health setting and the other worker in an outpatient mental health setting. The clinicians both worked with individuals suffering from serious mental illness. The clinicians had approximately 4 and 10 years of experience respectively. The following themes were most commonly identified by the participants.

Social Inclusion

All respondents agreed that social inclusion played a role in media used by them. Events, displays and printed materials were some examples that were given in regards to media types used by their respective programs. The intention of the media events and materials were noted to be primarily focused on advertising the programs, but had a secondary focus of inclusion. While discussing these types of media, comments relating to physical appearance and feeling welcomed were mentioned.

I know when we plan events we are focused on getting our program's name out there so people know of us, but we also want people to feel welcome and not afraid to come talk to us. So we do things to draw people in; items on the table, stuff for the kids if we have it, balloons – anything that catches someone's eye.

They usually ask me for my feedback before putting materials out, I always worry what message our picture is giving, do the people we show look real....do they actually represent the diverse client base that we serve? I try to think about that; I think it makes people feel more included to see similarities to themselves.

This theme highlights the participant's joint beliefs that client inclusion is important to provide services and make people feel welcome. It also highlights the ability of art to be a motivator for social inclusion through drawing people in and providing options to offer chances to experience a chance of feeling similarity of sameness with others in the community.

Beginning of a Dialogue

Participants shared similar thoughts that art could be used as a way to stimulate discussion around mental illness. The main idea between participants was that art would likely be looked at and or observed by a person who was nearby and would likely lead to further discussion of the art being observed.

We haven't been that involved in too much regarding media I guess. We do have a partnership with an agency though and they do some work with the arts and mental illness. The focus is on artists suffering from mental illness; it brings the subject up, gives people a time to talk about it.

Outside of giving people time to talk about mental illness it was thought by one participant that art actually encouraged the discussion process. This topic was then further elaborated on by the participant making a connection to their own clinical practice.

I guess, personally, I am more likely to talk when given photographs or artwork to look at. Maybe it is just me and I don't like to be quiet, but it's hard not to have a discussion

about what it is you are viewing. I think that is normal, right...for humans to discuss experiences they are having....

I am now thinking about myself, is this something I can do? Could I get a client to discuss something by engaging in some type of art viewing or experience; I don't mean art therapy though, I just mean that I have never tried it and wonder if that would make things more comfortable.

This theme highlights the participants' beliefs that art could engage individuals in discussion regarding mental health. This theme looks into the importance of finding a way to create and normalize these discussions that can work to fight negative mental health stigmas. This theme also looks at the connection art has to spurring dialogue in a more comfortable manner.

Determents of Stigma to Client Care

One topic that participants fully agreed on was that the stigma related to mental illness and mental health care had a negative impact on their clients. Participants stated a lack of trust from clients due to perceptions related to mental health and diagnosis. Participants also agreed to believing some clients do not continue treatment or receive medication as a result of the damaging effects of stigma.

There are times when a client tells me we will not have a good therapy experience and others where they just are not open to it. There can be a lot of reasons for it, including negative past experiences; however, sometimes it is because they do not want or agree with their diagnosis. I have heard many clients tell me they are not crazy, and it's not that I think they are, but they think that about themselves because they are receiving a mental health diagnosis. That is hurtful, to begin everything feeling that way makes it hard.

I have had clients tell me in the beginning they won't continue coming or they won't take medication. When I push for more I receive different responses, but often have heard a client say something like, we don't do this type of thing in my family. Of course I try and help them with that but it's a very hard thing for people to let go of.

This theme highlights participants' shared beliefs that stigma is detrimental to clients' mental health treatment. The stigma has informed public and personal views on mental health diagnoses and treatment, which in turn affects a client's responses to treatment. This could interrupt a client from receiving treatment, completing treatment, fully accepting their treatment, receiving support from outside individuals and taking medication for mental illness.

Discussion

This research found respondents were in agreement regarding social inclusion and creation of dialogue being benefits to using art for civic engagement on the topic of mental health stigma. Social inclusion was noted as being achieved by human service practitioners allowing individuals to feel welcome in their space and could be achieved by obtaining materials that assist in welcoming and inviting people. Social inclusion was also noted to occur when individuals could see similarities relating to themselves in the space where services were being provided or promoted. When discussing creating a dialogue regarding civic concerns respondents were in agreement that they could see themselves initiating discussion when presented with various forms of media. One respondent made a connection to micro level practice, suggesting that during individual therapy sessions media could be used to provide insight to a discussion. The general agreement was that art forms could be useful in supporting social inclusion and spurring civic dialogue, but that experience with the topic was limited.

The research also found that respondents feel strongly that the stigma that comes with mental health has negatively affected and impeded the treatment of clients with mental illness. Respondents stated having relevant experiences in which clients declined treatment due to stigma

surrounding mental illness. Respondents discussed having stigma related conversations with clients and identified the difficulty in addressing mental illness related stigma with clients.

Connections to the Literature

Social inclusion was found in the literature to be an important connection that arts could provide. Throughout the interviews conducted practitioners recognized social inclusion as a potential benefit to using art forms. Although practitioners were limited in their responses and referred mostly to marketing related media, they still understood a need to feel inviting and welcoming to people. One respondent mentioned that it was important to allow clients to feel like they could see similarities in themselves that are present in the promotion of services. This seemed similar to the literature regarding creating community symbols on public art murals as a way to allow individuals to connect with the community and increase social inclusion (McCarthy et al., 2004). Empowerment as a result of social inclusion was not specifically mentioned by any of the respondents; however, general discussion involving individual improvement as a result of social inclusion was agreed on. These respondents voiced the idea of empowerment through believing individuals would have improved treatment through the individual taking charge of their treatment due to feeling welcomed and invited.

The literature in favor of using the arts for social change measures discussed improved communication experiences as a result of the myriad of sense one can experience while taking in art. Romney (2012) discussed art being effective in this respect due to it involving thinking, feeling, listening and learning as well as talking. When discussing with respondents one stated that they were more likely to talk when observing art forms and mentioned feeling that it was natural for humans to discuss experiences as they are having them.

The literature review for this study discussed personal benefits one can receive from viewing art which are mostly therapeutic. However, this was not a theme brought up by any respondents. The literature also discusses integrating civic engagement on multiple levels of service. While one respondent did make a connection to her own micro practice it was not in regards to an issue of civic engagement. All respondents were well versed on the understanding of the deterrents of mental health stigma. They did not, however, have any knowledge on how the arts could provide civic engagement on the topic. It appeared that the respondents were unaware of this connection until the researcher began interviewing.

Extending from the Literature

Respondents in this study were exploring this topic for the first time and therefore were able to give some additional feedback on their impression of terms. The respondents were in agreement with the literature on some forms of social inclusion but they also added that inclusion involves inviting and welcoming someone into a space where they can feel comfortable. Respondents also added that inclusion involved seeing representations in images that showed similarities of selves.

The respondents to this study had their own reactions to the idea that media could stimulate civic dialogue. All respondents felt that they would have an engaged reaction to media when faced with it. One discussed feeling uncomfortable with a lack of dialogue, or the presence of silence, and that that would lead her discussion while also stating the naturalness for human responses to experiences. This was more impactful feedback than intentionally planned. The reactions from respondents showed this was new to them and allowed for a fresh reaction.

While respondents agreed with much of the literature regarding the negative effects of mental health stigma they were also able to add their own experiences with client responses to treatment as a result of mental health stigma. One respondent discussed client responses of feeling like people were calling them “crazy” as a result of their mental health diagnosis. This respondent’s fear was that if an individual is beginning treatment by denying their diagnosis due to stigma or having negative thoughts about oneself due to stigma that it would negatively impact their health. Another respondent had a similar experience of a client refusing to continue treatment or take medication to manage symptoms as a result of stigma. The respondent specifically refers to familial stigma as having a negative effect on client psyche and treatment.

Researcher’s Interpretation

This researcher’s interpretation is that many social workers and mental health providers are not utilizing various forms of media to engage clients in civic engagement. My own experience working with clients as a social worker and empowering them to address their own societal concerns through civic engagement has included supporting clients in writing letters to representatives or those in charge of writing policies that guide the client’s lifestyle. I have also supported clients in engaging to vote. In my schooling and work experience I have seen examples of clients talking to the legislators about how a policy has or will affect them. I have not seen efforts be put into engaging the public as a whole, including marginalized populations, in a civic engagement discussion revolved around art. I see from my research that art is impactful and can pull people’s attention and create dialogue. I therefore see that it is a potential tool that is not being studied, taught or used in the U.S. on a widespread scale.

Part of what informs my thought process that little is relatively known on the subject was my response rate for interview requests. I received a very low response and the belief is that practitioners felt unknowledgeable or unfamiliar with topic choice and therefore declined participating. I also believe this informs me in that very few, if any, social service providers are considering civic engagement as a way to decrease stigma.

Strengths and Limitations

Limitations of this study included a small sample size of two clinicians. Both were practicing mental health professionals who worked in a therapeutic manner with clients experiencing serious mental illness. Requests were sent out to sixteen individuals in leadership positions and it is unknown how many of them forwarded the request on to future staff. It is this researcher's assumption that there were a variety of reasons for low participation including; lack of follow through by original email recipients, availability and lack of perceived knowledge in subject matter.

The exploratory nature of this study was a strength of the research as it allowed a wide search of literature and potential participants. Responses received were limited, but the nature of the study allowed for a variety of mental health professionals to participate and give input. This study also used a qualitative interviewing style that allowed the researcher to ask participants clarifying questions, which allowed for more appropriate responses.

Implications for Social Work Practice

When looking at research on this subject one area that is in need of further examination includes case examples of civic engagement initiatives. Ideally the case examples would look at the effects over a long term and include both qualitative and quantitative data. This could occur

by researching public responses following a series of community art projects that focus on one area of civic engagement, such as reducing mental illness stigma. These surveys and projects could occur over several years and could monitor if there are any decreases in negative public perceptions of various mental illnesses and treatment. In order to gain more data and look at a more diverse audience this research could occur in multiple cities across the U.S. at the same time. It would also be imperative to track mental health treatment records in those cities during that time frame to see if there is an increase in those seeking mental health services as well as those continuing through with treatment. To measure if potential decreases in stigma of mental illness correlate with an increase in clients seeking services it would be necessary to survey clients who were newly seeking out services. This would likely need input from a wide variety of mental health practitioners. This could help develop understanding of the effectiveness of such projects and evaluate how community stigma is perceived to have changed as well as the increase of individuals suffering from SMI now seeking treatment.

When looking at social work practice and policy regarding this topic I believe the focus should be in terms of advocacy. The purpose of this research was to understand the benefits of using art forms to increase civic engagement in relation to mental illness. However, this researcher's interpretation of the literature review and research conducted is that art forms can be used as a way to engage the public and get people's attention regarding a civic matter. When social workers are pushing for policy changes to create effective change they can look to collaborate with various artists to create media that can serve dual purposes. Art forms used in public policy can engage the public, draw attention to a subject they knew little about, hadn't thought about or are now inspired about as a result. Art forms can also be used to illustrate a point to a legislator, committee member or leadership position. Art can be engaging and spur

discussion, which may be useful to a social worker attempting to engage on a social justice issue. The benefits of engaging the public in discussion regarding mental health stigma are intended to have positive benefits from those suffering from mental illness. The reduction of stigma could allow more individuals who are not seeking treatment to consider seeking support. For those already receiving MI treatment it could allow for a lower amount of internal stigma and allow them to seek out treatment, medication and resources. With the internal stigma diminished a person may be more likely to open up, accept their diagnosis, reach for more support or be willing to dive deeper into their therapeutic work.

When looking at social work practice and education I think using art forms to increase civic engagement and create macro level change is the core of social work practice and should be essential in both. Social workers are taught to be adaptive to meet needs and create change with our clients and systems. However, when it comes to the topic of mental health stigma and civic engagement it does not seem that adaptations are being made to meet the needs. Using art forms to create dialogue, increase social inclusion and decrease negative stigma in mental health is an adaptation to the current needs of society in the United States. It is a collaborative effort that community organizers and artists need to support, and it is an effort that is likely to show only positive change.

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Appendix A

Consent Form

University of St. Thomas

Art as a Means for Civic Engagement: A Tool for Social Workers

844082-1

You are invited to participate in a research study about ways social workers can use the arts to engage communities in combating mental health stigma. I invite you to participate in this research. You were selected as a possible participant because of your professional title and because the agency you are employed by has done work related to addressing mental health stigma in the past or currently. You are eligible to participate in this study because of your title and agency's work. The following information is provided in order to help you make an informed decision whether or not you would like to participate. Please read this form and ask any questions you may have before agreeing to be in the study.

This study is being conducted by Daniella Schulz, graduate student of the School of Social Work at the University of St. Thomas. The research advisor for this study is Lance Peterson, LICSW, Ph.D., Assistant Professor in the School of Social Work at the University of St. Thomas. This study was approved by the Institutional Review Board at the University of St. Thomas.

Background Information

The purpose of this study is to look at ways in which the arts can be used to involve the community in civic engagement related to combatting mental health stigma. The study will consider ideas and thoughts from advocacy and mental health professionals on how the arts can be used to engage communities in this topic, as well as perceptions of effectiveness of using the arts in this way. This research hopes to inform future clinical social workers of ways they can engage their communities on a civic level.

Procedures

If you agree to participate in this study, I will ask you to do the following things: Meet with myself one time for approximately 45 minutes and answer a number of questions related to arts programs combatting mental health stigma. The interview will take place at a private meeting room, either at your office space, or in the University of St. Thomas library. This study will interview six to ten participants. All interviews will be audio recorded. There will be no follow up after the initial meeting.

Risks and Benefits of Being in the Study

This study has no known risks.

There are no direct benefits for participating in this study.

Privacy

Your privacy will be protected while you participate in this study. All interviews will be conducted in a private and closed setting.

Confidentiality

The records of this study will be kept confidential. In any sort of report I publish, I will not include information that will make it possible to identify you. The types of records I will create include audio recordings, digital transcripts, consent forms and paper notes. Audio recordings will be collected and stored digitally on the researcher's personal computer which is password protected. Audio recordings will be deleted after they are transcribed and no later than 05/16/16. Digital transcripts will also be stored on researcher's private computer with password protection. Digital transcripts will be destroyed no later than 07/01/16. Consent forms will be stored in a locked filing cabinet. Paper notes will also be kept in a locked filing cabinet and will be destroyed no later than 05/16/16. Only the principal researcher will have access to this information. All signed consent forms will be kept for a minimum of three years upon completion of the study. Institutional Review Board officials at the University of St. Thomas reserve the right to inspect all research records to ensure compliance.

Voluntary Nature of the Study

Your participation in this study is entirely voluntary. Your decision whether or not to participate will not affect your current or future relations with the University of St. Thomas, St. Catherine University, or the School of Social Work. There are no penalties or consequences if you choose not to participate. If you decide to participate, you are free to withdraw at any time without penalty or loss of any benefits to which you are otherwise entitled. Should you decide to withdraw, data collected about you will be used. However, you are free to skip any questions I may ask, and free to stop the interview at any time without any penalties or consequences.

Contacts and Questions

My name is Daniella Schulz. You may ask any questions you have now and any time during or after the research procedures. If you have questions later, you may contact me at 612-390-9717 and daniella.schulz@yahoo.com or my research advisor, Lance Peterson at 651-962-5811 or pete2703@stthomas.edu. You may also contact the University of St. Thomas Institutional Review Board at 651-962-6035 or muen0526@stthomas.edu with any questions or concerns.

Statement of Consent

I have had a conversation with the researcher about this study and have read the above information. My questions have been answered to my satisfaction. I consent to participate in the study. I am at least 18 years of age. I give permission to be audio recorded during this study.

You will be given a copy of this form to keep for your records.

Signature of Study Participant

Date

Print Name of Study Participant

Signature of Researcher

Date

Appendix B

Interview Questions

1. What is the main premise/goals for your program?
2. Describe the population and/or issue(s) you attempt to target with your program?
3. Where did the idea for this program come from?
 - a. How did the program get started?
4. What media types are used (e.g., events, specific types of arts, display, etc.) to connect with the community?
5. What measures do you take to determine if your program is having an impact on the community?
 - a. What impacts have been seen?
 - b. What other measures would you like to have in place to determine if there is an impact on the community?
6. Who are other players involved in disseminating the program? Do you partner with other agencies or individuals?
7. How do you obtain funding, and what are the funding requirements of those who help support you?
8. How would you see social workers playing a role in this?